1300 I STREET P.O. BOX 903447 SACRAMENTO, CA 94203-4470

> (916) 324-5498 Facsimile: (916) 444-3651

E-Mail: martha.cook@doj.ca.gov

September 29, 2003

State of California

County of Sacramento

I, Martha L. Cook, hereby declare that I am employed by the State of California within the Department of Justice, Office of the Attorney General, as Registrar of Charitable Trusts. In this capacity and as part of my official duties, I maintain the records and files on all charitable organizations that have registered and file periodic reports pursuant to the Uniform Supervision of Trustees for Charitable Purposes Act (Government Code sections 12580 through 12597) and the rules and regulations pertaining thereto (California Administrative Code sections 300 through 312.)

I hereby certify that the attached form 990's for the fiscal years July 1, 1998 - June 30, 1999; July 1, 1999 - June 30, 2000; July 1, 2000 - June 30, 2001; and July 1, 2001 - June 30, 2002 are true and correct copies of documents in our file for the AMERICAN CIVIL RIGHTS COALITION (CT #108395).

MARTHA L. COOK

Registrar of Charitable Trusts

For BILL LOCKYER
Attorney General

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.



| | ment of the | ne Treasury e Service | ► The organization may have | to use a copy of this return to | satisfy | state reporting requirements | | inspection |
|----------|-------------------------------|--------------------------|---|---|---|--|------------------|---------------------------|
| | | | | | nd end | | | |
| Ch | eck if | | lame of organization | | | D Em | ployer iden | tification number |
| ap | pilcabie: | use IRS | | | | | | è |
| | Address change | print or AM | ERICAN CIVIL RIGHT | S COALITION | | | 2-200 | 10.00 |
| | Name change initial | | lumber and street (or P.O. box if mail is n | ot delivered to street address) | | | ephone nui | nher /08.5 |
| | return Final | 10 | 31 CAPITOL AVENUE | | | | punifing method: | |
| - | retum Amende | tions. | CRAMENTO, CA 9581 | 6-5755 | | | Other (specify) | Con Casi Cas Accide |
| | retum Applicati pending | on • Sect | on 501(c)(3) organizations and 4947(a) | 1) nonexempt charitable trusts | s | Hand I are not applicable to | | 7 organizations. |
| | pending | must | attach a completed Schedule A (Form 9 | 90 or 990-EZ). | | H(a) Is this a group return | | |
| W | eb site: | ►WWW.A | CRC1.ORG | | | H(b) If "Yes," enter number | of affiliates | |
| | | | | | | H(c) Are all affiliates include | ed? N/ | 'A Yes L |
| | | | only one) \triangleright \boxed{X} 501(c) (4) \blacktriangleleft (linse | | 527 | (If "No," attach a list.) | | |
| | | | the organization's gross receipts are nor | | | H(d) is this a separate return | _ | |
| or | ganizati | on need not fi | le a return with the IRS; but if the organize a return without financial data. Some sta | ation received a Form 990 Pack | age | ganization covered by I Enter 4-digit GEN ▶ | a group ru | IIIIg? LITES LAL |
| ın | tne mai | 1, IC STIOUTO THE | a letum without imancial data. Some sta | tes require a complete return. | | M Check | nmanizatio | n is not required to alta |
| e e | 000.000 | ninte: Artif line | s 6b, 8b, 9b, and 10b to line 12 | 1,899,357 | 7. | Sch. B (Form 990, 990 | | |
| Dai | 4 1 1 | Revenue. | Expenses, and Changes in | | | nces | | |
| 2,454 | ensus | Contributions | s, gifts, grants, and similar amounts recei | ved: | | | | |
| | | | support | | 1a | 1,836,395. | | |
| | | | c support | | <u>1b</u> | | | |
| | C | Government | contributions (grants) | | 10 | | | |
| | đ | | es 1a through 1c) | CE 672 . | | | 1d | 1,836,395 |
| | | (cash \$ | 1,770,722. noncash\$_ | 03,0/3.) | | *************************************** | 2 | 1,030,333 |
| | 2 | Program sen | vice revenue including government fees a dues and assessments | no contracts (from Part VII, line | 93) | *************************************** | 3 | |
| | | Membership | avings and temporary cash investments | | | | 4 | 143 |
| | 4 5 | | d interest from securities | | | | 5 | |
| | Бa | | V Illinost 1011 000011100 | | | | | |
| 1 | b | Less: rental e | xpenses | | 6b | | | |
| | C | Net rental inc | come or (loss) (subtract line 6b from line | 6a) | | | 60 | |
| Revenue | 7 | | nent income (describe | | | <u></u> | 7 | |
| ٳڿ | 8 a | | nt from sale of assets other | (A) Securities 62,819. | | (B) Other | | |
| - | | | ry | 60 100 | 8a 8b | | | |
| | þ | | other basis and sales expenses | 2,719. | 8c | | | |
| 1 | G di | Met gain or (|) (attach schedule)loss) (combine line 8c, columns (A) and (| | | | 8d | 2,719 |
| | 9 | Special even | ts and activities (attach schedule) | | | | | |
| | | Gross reveni | ue (not including \$ | of contributions | | ì | | |
| | | reported on | line 1a) | ••••• | 9a | | _ | |
| | b | Less: direct | expenses other than fundraising expense | s | .9b | | _ | |
| | | | or (loss) from special events (subtract lin | | | 1 | 90 | |
| | 16 a | Gross sales | of inventory, less returns and allowances | | 10a | | - | |
| | b | Less: cost of | goods sold | | 10b | | 100 | |
| | | Gross profit | or (loss) from sales of inventory (attach s | chedule) (subtract line 100 fro | in nue | 10a) | 11 | |
| | .11 | Other revenu | ne (from Part VII, line 103) ne (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, | | ••••• | *************************************** | | 1,839,25 |
| | 12 | l otal revent | vices (from line 44, column (B)) | 100, 810 11) | • | | | 2,172,69 |
| SS | 13 | Managaman | t and general (from line 44, column (C)) | *************************************** | | | 14 | 14,12 |
| Expenses | 14 15 | Fundraleinn | (from line 44, column (D)) | *************************************** | | | 15 | 11,75 |
| ă | 16 | Payments to | affiliates (attach schedule) | | | | 16 | |
| ш | 17 | Total expen | ses (add lines 16 and 44, column (A)) | | | | 17 | 2,198,57 |
| | 18 | Excess or (d | eficit) for the year (subtract line 17 from | ine 12) | | | 18 | -359,31 71 |
| LO. | 19 | Net assets o | rfund balances at beginning of year (fror | n line 73, column (A)) | | **************** | 19 20 | /1 |
| 88 | | | | | | | . 201 | |
| Assets | 20 | Other chang | es in net assets or fund balances (attach r fund balances at end of year (combine l | explanation) | | | | -358,60 |

| Form | 990 (2001) AMERICAN | CIV | IL RIGHTS CO | ALITION | 52 20 | 006786 Page 2 |
|-----------|---|---------------------|---|--|--|---|
| P | Statement of All organic Functional Expenses (4) or | janizati ganizat | ons must complete column lons and section 4947(a)(1) | (A). Columns (B), (C), and nonexempt charitable trus | (D) are required for section its but optional for others. | 501(c)(3) and |
| 1 | Do not include amounts reported on line 6b, 6b, 9b, 10b, or 16 of Part I. | | (A) Total | (B) Program services | (C) Management and general | (D) Fundraising |
| 22 | Grants and allocations (attach schedule) | 000000 | | 20111035 | and gonorer | |
| | cash \$noncash \$ | 22 | | | | |
| 23 | Specific assistance to individuals (attach schedule) | 23 | | | | |
| 24 | Benefits paid to or for members (attach schedule) | 24 | | | | |
| 26 | Compensation of officers, directors, etc. | 25 | 135,554. | 132,272. | 1,094. | 2,188. |
| 28 | Other salaries and wages | 26 | 94,180. | 92,369. | 809. | 1,002. |
| 27 | Pension plan contributions | 27 | | | | |
| 28 | Other employee benefits | 28 | 3,726. | 3,726. | | |
| 29 | Payroli taxes | 29 | 17,232. | 16,842. | 146. | 244. |
| 30 | • | 30 | 6 000 | | 6 000 | |
| 31 | Accounting fees | 31 | 6,902. | 869. | 6,033. | |
| 32 | Legal fees | 32 | 3,266. | 1,650. | 1,616. | |
| 33 | Supplies | 33 | 375. | 375. | 297. | 1,186. |
| | Telephone | 34 | 5,012. | 3,529. | 50. | 50. |
| | Postage and shipping | 35 | 13,787. | 13,687. | 2,771. | 50. |
| 36 | Occupancy | 36 | 9,814. | 7,043. | 2,111. | |
| 37 | Equipment rental and maintenance | 37 | 27,778. | 26,592. | 166. | 1 |
| 38 | Printing and publications | 38 39 | 7,426. | 7,426. | 100. | |
| | | 40 | 7,420. | 7,420. | | |
| 40 | Conferences, conventions, and meetings | 41 | 5,573. | 5,573. | - | |
| 41 | Interest | 42 | 37. | 3/3/3. | 37. | |
| 42 | Depreciation, depletion, etc. (attach schedule) Other expenses not covered above (itemize): | 36 | | | | |
| | • | 43a | | | | |
| | | 43b | | | | |
| 'n | | 43c | | | | |
| 4 | | 431 | | Service and annually | | - |
| ø | SEE STATEMENT 3 | 438 | 1,867,910. | 1,860,742. | 1,108. | 6,060. |
| | Total functional expenses (add lines 22 through 43) | | | | | 1 |
| | Organizations completing columns (B)-(D), carry these totals to lines 13-15 | 44 | 2,198,572 | 2,172,695. | 14,127. | 11,750. |
| Jok | nt Costs. Check 🕨 🔲 if you are following SOP 98 | B-2. | | | | C= · |
| Are | any joint costs from a combined educational campai | ign and | fundraising solicitation rep | orted in (B) Program servi | ces?►L | Yes LX No |
| If "Y | es," enter (i) the aggregate amount of these joint co | sts \$ _ | ;(| li) the amount allocated to | Program services \$ | ; |
| //// | the amount allocated to Management and general \$ | | ; and (| iv) the amount allocated to | Fundraising \$ | |
| P | art III Statement of Program Servi | ce A | ccomplishments | <u> </u> | | |
| Wh | at is the organization's primary exempt purpose? | | | | | Program Service |
| <u>EI</u> | JIMINATION OF RACE/SEX E | JASI | ED PREFERENCE | 15 | blications issued eta Discuss | Expansas |
| All o | rganizations must describe their exempt purpose achievement evernents that are not measurable. (Section 501(c)(3) and (4) or | ganizati | ons and 4947(a)(1) nonexempt of | haritable trusts must also enter | the amount of grants and | (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.) |
| alioc | cations to others.) | | | | | trusts; but optional for others. |
| а | | | NATION OF RAC | | | |
| | PREFERENCES IN GOVERNME AND FEDERAL LEVELS THRO | INT | PROGRAMS ANI | TAMINEC AND | | |
| | | JUGI | | irants and allocations \$ | DODITING | 2,172,695. |
| | ACTIVITIES | | | Mants and anocations o | | |
| b | | | | | | |
| | | | | | | |
| | | | 16 | irants and allocations \$ | 12 × 1 | |
| _ | | | | itanto pilo anocationo y | | |
| C | | | | The second secon | _ | |
| | | | | | | |
| | | - | 10 | irants and allocations \$ | N | |
| لم | | | | TELLE BITO GUOGGIDITO W | | |
| d | | | | | | |
| | | | | | | |
| | | | | irants and allocations \$ |) | |
| | Other program services (altach schedule) | | | rants and allocations \$ | У | |
| f | Total of Program Service Expenses (should equal | line 44 | | | > | 2,172,695. |
| | | | | | | |

| Form | 990 (2 | 2001) AMERICAN CI | | 52-2006786 Pag | | | | |
|-----------------------------|----------------|--|---------------------------------------|-----------------------|---------------------------------------|----------------|-----------------------|--|
| Pa | rt IV | Balance Sheets | | | | | | |
| Note | : When | re required, attached schedules and amoun Id be for end-of-year amounts only. | ts within the descr | iption column | (A) Beginning of year | | (B) End of year | |
| | 45 46 | Cash - non-interest-bearing Savings and temporary cash investments | · · · · · · · · · · · · · · · · · · · | | 95,729. | 45 46 | 149,964. | |
| | | Accounts receivable | | | | 470 | | |
| | 48 a | Pledges receivable | 48a | | | 48c | | |
| | 49 50 | Grants receivable | | | | 49 | | |
| Assets | 51 a | and key employees Other notes and loans receivable Less: allowance for doubtful accounts | 51a | | | 516 | | |
| • | 52 53 54 | Inventories for sale or use | | | | 52 53 | | |
| | | Investments - land, bulldings, and equipment: basis | | 3 003(| | | | |
| | 56 | Less: accumulated depreciationinvestments - other | | | | 55s 56 | | |
| | 57 a b | Land, buildings, and equipment: basis Less: accumulated depreciation Other assets (describe ► | 57b | | 37. | 57c | | |
| | 59 | Total assets (add lines 45 through 58) (must e | ual line 74) | | 95,766. | | 149,964. | |
| | 60 61 62 | Accounts payable and accrued expenses Grants payable | •••••• | | 95,052. | 60 61 62 | 68,565. | |
| | 63 64 a | Loans from officers, directors, trustees, and key a Tax-exempt bond liabilities | employees | | | 63 64a | 440,000. | |
| | 65 | b Mortgages and other notes payable | | STMT 4 | | 65 | | |
| _ | 66 Orgai | Total liabilities (add lines 60 through 65) nizations that follow SFAS 117, check here | X and complete | lines 67 through | 95,052 | | 508,565 | |
| ances | 57 68 | 69 and lines 73 and 74. Unrestricted | | | -38,911 39,625 | - 68 | -466,251. 107,650. | |
| Net Assets or Fund Balances | 69 | Permanently restrictednizations that do not follow SFAS 117, check he 70 through 74. | re 🕨 🔲 and co | omplete lines | · · · · · · · · · · · · · · · · · · · | 69 | | |
| ssets or | 70 71 | Capital stock, trust principal, or current funds Pald-in or capital surplus, or land, bullding, and Retained earnings, endowment, accumulated in | equipment fund | | | 70 71 72 | | |
| Net A | 72 | Total net assets or fund balances (add lines 6) | through 69 OR line | s 70 through 72; | 714 | | -358.601. | |

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Total liabilities and net assets / fund balances (add lines 66 and 73)

cuiumn (A) must equal line 19; column (B) must equal line 21)

-358,501.

| Form 990 (2001) AMERICAN CIVIL RIGHTS | | | 52-20067 | 86 Page |
|--|--|---|--|--|
| Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return | Part IV_B Recond Financ Return | ial Statements | penses per A With Expen | udited ses per |
| Total revenue, gains, and other support per audited financial statements | a Total expenses and I | osses per | 000 000000 | |
| per audited financial statements | a Total expenses and I audited financial stat b Amounts included or line 17, Form 990: | ements | ▶ a 2, | 198,572. |
| b Amounts included on line a but not on | line 17, Form 990: | iline a but not on | | |
| line 12, Form 990: | (1) Donated services | | | |
| (1) Net unrealized gains | and use of facilities | \$ | | |
| on investments\$ | (2) Prior year adjustmen | ts | | |
| (2) Donated services and use of facilities \$ | reported on line 20, | | | |
| | Form 990 | \$\$. | | |
| (3) Recoveries of prior | (3) Losses reported on | | | |
| year grants\$ | line 20, Form 990 | \$ | | |
| (4) Other (specify): | (4) Other (specify): | | | |
| s | | \$ | | |
| ▶ b 0. | Add amounts on line | s (1) through (4) | b | 0. |
| ▶ [c] 1,839,257. | c Line a minus line b | ••••• | ▶ c 2, | 198,572. |
| | d Amounts included on 990 but not on line a | line 17, Form | | |
| | (1) Investment expenses | | | |
| | not included on | | | |
| | line 6b, Form 990 | 2 | | |
| | (2) Other (specify): | . ▼ | — | |
| s | | \$ | | |
| Add amounts on lines (1) and (2) b d 0 . | Add amounts on lines | (1) and (2) | | 0. |
| Total revenue per line 12, Form 990 | e Total expenses per lin | | ····· • ·· | <u> </u> |
| (line c plus line d) ► a 1,839,257. | (line c plus line d) | | ▶ a 2 a | 198.572. |
| Part V List of Officers, Directors, Trustees, and Key I | mployees (List each on | e even if not comper | isated.) | 2307072 |
| (A) Name and address | (B) Title and average hours per week devoted to position | (C) Compensation (If not paid, enter | (D) Contributions to employee benefit plans & deferred | (E) Expense account and other allowances |
| WARD CONNERLY | CHAIRMAN | | Compensation | outer anottaneou |
| 2215 21ST STREET | | | | |
| | 20 | 135,554. | 0. | 0. |
| THOMAS L. RHODES | VICE CHAIRMAN | | | |
| 215 LEXINGTON AVENUE | | | | |
| NEW YORK, NY 10016 | •5 | 0. | 0. | 0. |
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| | | | | |
| 75 Did any officer, director, trustee, or key employee receive aggregate compensation | on of more than \$100 000 from | m vour organization | and all related St | PMT 5 |
| organizations, of which more than \$10,000 was provided by the related organizations. | | | und an iolated | orm 990 (2001 |

| | 990 (2001) AMERICAN CIVIL RIGHTS COALITION 52-20 | | | age 5 |
|-----------|---|-------------|---|---|
| Pai | Other Information | | Yes | |
| 76 | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity | | | X |
| 77 | Were any changes made in the organizing or governing documents but not reported to the IRS? | 77 | | X |
| | If "Yes," attach a conformed copy of the changes. | | | **** |
| | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 78a | - | <u>X</u> |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | 78b | | |
| 79 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? | 79 | 200000000000000000000000000000000000000 | X |
| | If "Yes," attach a statement | | | |
| 8U a | Is the organization related (other than by association with a statewide or nationwide organization) through common membership, | | Х | 解解数 |
| | governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization? If 'Yes,' enter the name of the organization AMERICAN CIVIL RIGHTS INSTITUTE | 80a | Λ | 333355 |
| D | and check whether it is X exempt OR nonexem | - | | |
| 01 a | Enter direct or indirect political expenditures. See line 81 instructions 81a | O. | | |
| | Did the organization file Form 1120-POL for this year? | 81b | ggavances (n | AND DESCRIPTION OF THE PERSON |
| 82 a | | 010 | l t | |
| 0Z 4 | fair rental value? | 82a | | X |
| b | If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an | | | |
| u | expense in Part II. (See instructions in Part III.) 82b N/A | | | |
| R3 2 | Did the organization comply with the public inspection requirements for returns and exemption applications? | 83a | X | AND SECOL |
| os a h | Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | | X | |
| 84 a | Did the organization solicit any contributions or gifts that were not tax deductible? | | | Х |
| | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not | | | |
| _ | tax deductible? | | | |
| 85 | 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? | 85a | X | |
| | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | X |
| | If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax | | | |
| | owed for the prior year. | | | |
| 2 | Dues, assessments, and similar amounts from members N/A | | | |
| d | Section 162(e) lobbying and political expenditures N/A | | | |
| 9 | Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices | | 1000 | |
| f | Taxable amount of lobbying and political expenditures (line 85d less 85e) | | | |
| g | Does the organization elect to pay the section 6033(e) tax on the amount in 85f? | 85g | | |
| h | If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues | 689 | | |
| | allocable to nondeductible lobbying and political expenditures for the following tax year? | 85h | 10000000 | Nacrosco. |
| 86 | 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on line 12 | | | |
| đ | Gross receipts, included on line 12, for public use of club facilities | - 333 | | |
| 87 | 501(c)(12) organizations. Enter: a Gross income from members or shareholders | - 300 | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources | | | |
| | against amounts due or received from them.) | 100,00 | | |
| 88 | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, | | | |
| | or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? | 88 | | x |
| | If "Yes," complete Part IX | | | |
| 89 a | 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: | | | lar en |
| | section 4911 ► N/A ; section 4912 ► N/A ; section 4955 ► N/A | | SERVICE | 91000000 |
| þ | 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit | | | |
| | transaction during the year or did it become aware of an excess benefit transaction from a prior year? | 89b | | x |
| | If "Yes," attach a statement explaining each transaction | <u>Foan</u> | | |
| C | Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under | | | 0. |
| | sections 4912, 4955, and 4958 | | | 0. |
| đ | Enter: Amoust of (ax on line 89c, above, reimbursed by the organization | | | |
| 90 a | List the states with which a copy of this return is filed CALIFORNIA Number of employees employed in the pay period that includes March 12, 2001 90b | | | |
| b | Number of employees employee in the pay period that includes warch 12, 2001 | | - | |
| | The books are in care of ▶ JENNIFER HATGES Telephone no. ▶ 916- | -444- | 2278 | } · |
| 91 | The books are in care of ► JENNIFER HATGES Telephone no. ► 916- | 4 4 3 - 1 | | |
| | Located at ▶ 2131 CAPITOL AVENUE, SUITE 306, SACRAMENTO, CA ZIP+4 | ▶958 | 16 | |
| | FOCMED SI - TIST CULTION WARRION' DOLLE 200' DECEMBER 10 CT | | | |
| | Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Chack here | | ▶I | |
| 92 | section 4947(a)(1) nonexempt charitable trusts filing Forth 990 in field of Futili 1041- check field and enter the amount of tax-exempt interest received or accrued during the tax year | N | /A | |
| 12304 | | | rm 990 | (2001 |
| 01-02- | 02 015 750020 04130 2001 09000 AMERICAN CIVIL RIGHTS COAI | | | 1 |

| om 990 (2001) AMER Part VII Analysis of Income | -Producing A | ctivities | HTS COALIT See Specific Instructio | ns on page 3 | 2.) | 2006786 Page |
|---|-------------------------------------|--------------------|------------------------------------|---------------|---|---------------------------|
| Note: Enter gross amounts unless other | rwise | | ed business income | Excluded | d by section 512, 513, or 514 | /E/ |
| indicated. | | (A) | (B) | (C) Exchu- | (0) | (E) Related or exempt |
| 93 Program service revenue: | · | Business Code | Amount | sion | Amount | function income |
| a | | | | | | Tanodan modific |
| b | | | | | | |
| C | | | | | | |
| | | | | ++ | | |
| 8 | | | | ++ | | |
| Medicare/Medicaid payments | | | | - | | |
| g Fees and contracts from government ag | | | | | | |
| 94 Membership dues and assessments | | | | | | |
| 95 Interest on savings and temporary | | | | - | | |
| | 1 | | | 1 | | |
| cash investments | ······ | | | 14 | 143. | |
| 96 Dividends and interest from securities | T | | | | | ······ |
| 97 Net rental income or (toss) from real est | | | | | | |
| a debt-financed property | ······ | | | | | |
| b not debt-financed property | ······ | | | | | |
| 98 Net rental income or (loss) from person | al property | | | | | |
| 99 Other investment Income | L | | | | | |
| OO Gain or (loss) from sales of assets | | | | | | |
| other than inventory | L | | | 18 | 2,719. | |
| D1 Net income or (loss) from special events | | | | | | |
| 02 Gross profit or (loss) from sales of inven | itory | | | | | |
| 03 Other revenue: | 1 | | | | | |
| a | | | | | | |
| b | | | | | | |
| | | | | | | |
| | | | | | | |
| 8 | | | | | | |
| 04 Subtotal (add columns (B), (D), and (E)) | | | | 0. | 2,862. | 0 |
| D5 Total (add line 104, columns (B), (D), an | nd (E)) | | | | > | 2,862 |
| itt: Une 105 pius line 1a, Part I, snould | equal the amoun | it on line 12, | Part I. | | | |
| Part VIII Relationship of Activ | vities to the A | ccomplis | hment of Exen | npt Purpe | oses (See Specific Instruct | ions on page 32.) |
| Ine No. Explain how each activity for whi | ch income is report | ed in column | (E) of Part VII contribu | ited importan | tly to the accomplishment of | the organization's |
| exempt purposes (other than by | providing funds for | such purpose | is). | , | ., | in organization i |
| 5 EARNINGS ON SAV | | | | | | |
| 00 GAIN ON SALE OF | MARKETAB | LE SEC | URITIES | | | |
| | | | | | | |
| | | | | | | |
| Part IX Information Regarding | ng Taxable S | ubsidiarie | s and Disregar | ded Enti | ties (See Specific instruction | ons on page 33.) |
| (A) Nama, address, and EIN of corporation, | (8) | | (C) | | (D) Total income | (È) |
| partnership, or disregarded entity | Percentage of ownership interest | | Nature of activities | | Total Income | End-of-year assets |
| | % | E-1 | | | | Darria |
| N/A | % | | | | | |
| | % | | | 100 | | |
| | % | 15 20 | | | | |
| art X Information Regardin | | Associate | d with Person | al Benefi | t Contracte (See Seed | le lastructions on none 9 |
| (a) Did the organization, during the year, rec | | | | | | Property Property |
| | | | | | OBHEIR COIRTACLY | |
| | v premiums, mrecii | v or inairectiv | . vii a Dersonal Denefit | CODITACTA | | Yes X No |
| b) Did the organization, during the year, pa Note: If "Yes" to (b), file Form 8870 and | | | • | | *************************************** | |

ACRC Fixed Asset Schedule June 30, 2002

| | | CO | ST | | ACCUMULATED DEPRECIATION | | | | | |
|------------------------------|--------------------|------|---------|--------------------|--------------------------|-------|---------|--------------------|--|--|
| · | Bal @ 6/30/2001 | Adds | Deletes | Bal @ 6/30/2002 | Bal @ 6/30/2001 | Adds | Deletes | Bal @ 6/30/2002 | | |
| - Equipment | 1,714.11 | | | 1,714.11 | 1,704.00 | 10.11 | | 1,714.11 | | |
| Computer Software | 795.00 | | | 795.00 | 768.00 | 27.00 | | 795.00 | | |
| Total Furniture & Office Eq. | 2,509.11 | _ | | 2,509.11 | 2,472.00 | 37.11 | - | 2,509.11 | | |

DEPRECIATION EXPENSE

| Yrs | Asset | Date Acq'd | Cost | 6/30/1997 | 6/30/1998 | 6/30/1999 | 6/30/2000 | 6/30/2001 | 6/30/2002 | 6/30/2003 | Total |
|---------|----------------|------------|----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|----------|
| 5 Equip | | PY | 1,714,11 | 312.00 | 348.00 | 348.00 | 348.00 | 348.00 | 10.11 | - | 1,714.11 |
| | outer Software | PY | 795.00 | 144.00 | 156.00 | 156.00 | 156.00 | 156.00 | 27.00 | _ | 795.00 |
| Total | • | 1 - + | 2,509.11 | 456.00 | 504.00 | 504.00 | 504.00 | 504.00 | 37.11 | - | 2,509.11 |

ACRC Fixed Asset Schedule June 30, 2002

| _ | | CO | ST | | ACCUMULATED DEPRECIATION | | | | |
|------------------------------|--------------------|------|---------|--------------------|--------------------------|-------|----------|--------------------|--|
| | Bal @ 6/30/2001 | Adds | Deletes | Bal @ 6/30/2002 | Bal @ 6/30/2001 | Adds | Deletes | Bal @ 6/30/2002 | |
| Equipment | 1,714.11 | | | 1,714.11 | 1,704.00 | 10.11 | | 1,714.11 | |
| Computer Software | 795.00 | | | 795.00 | 768.00 | 27.00 | | 795.00 | |
| Total Furniture & Office Eq. | 2,509.11 | - | | 2,509.11 | 2,472.00 | 37.11 | <u>.</u> | 2,509.11 | |

DEPRECIATION EXPENSE

| Yrs Asset | Date Acq'd | Cost | 6/30/1997 | 6/30/1998 | 6/30/1999 | 6/30/2000 | 6/30/2001 | 6/30/2002 | 6/30/2003 | Total |
|---------------------|------------|----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|----------|
| 5 Equipment | PY | 1,714.11 | 312.00 | 348.00 | 348.00 | 348.00 | 348.00 | 10.11 | - | 1,714.11 |
| 5 Computer Software | PY | 795.00 | 144.00 | 156.00 | 156.00 | 156.00 | 156.00 | 27.00 | _ | 795.00 |
| Totals | | 2,509.11 | 456.00 | 504.00 | 504.00 | 504.00 | 504.00 | 37.11 | - | 2,509.11 |

| AMERICAN CIVIL RIGHTS COALITION | | 52-2006786 |
|--|----------------------------|-------------|
| 50 60 60 40 40 40 | FOOTNOTES | STATEMENT 1 |
| SCHEDULE OF AGGREGATE COMPENSATION (FORM 990, PART V, PAGE 4, LINE 75 CONSULTING FEES PAID TO WARD CON |): | 55,000. |
| SCHEDULE OF AGGREGATE COMPENSATION ORGANIZATION: AMERICAN CIVIL RIGHT CONSULTING FEES PAID TO WARD CON | S INSTITUTE EIN 52-2004697 | 352,009. |

STATEMENT REGARDING ACTIVITIES WITH DIRECTORS, TRUSTEES, PRINCIPAL OFFICERS OR CREATOR

WARD CONNERLY IS CHAIRMAN OF ACRC. HE WAS PAID A SALARY IN THE AMOUNT OF \$135,554 FOR TIME SPENT ON ACRC PROGRAMS. WARD CONNERLY IS AN EMPLOYEE OF A RELATED ORGANIZATION, ACRI. ACRI ALLOCATES SALARY EXPENSES TO ACRC FOR TIME SPENT ON ACRC PROGRAMS. ACCORDINGLY, THE AMOUNT \$135,554 IS INCLUDED IN THE AMOUNT REPORTED IN COMPENSATION IN STATEMENT 5.

| FORM 990 GAIN (LC | OSS) FROM PUBL | ICLY T | RADED SE | CURIT | PIES | STATEMENT | 2 |
|---|-----------------------------|----------------------------|-----------------------------|-------|-------------------------|------------------|-----------|
| DESCRIPTION | GROS SALES | | COST OTHER E | | EXPENSE OF SALE | NET GAI | |
| NEON SYSTEMS, INC | 62 | ,819. | 60,100 | | 0. | 2,719 | |
| TO FORM 990, PART I, LIN | NE 8 62, | ,819. | 60, | 100. | 0. | 2,719 | |
| FORM 990 | ОТНЕ | R EXPE | NSES | | | STATEMENT | 3 |
| DESCRIPTION | (A) TOTAL | (B) PROGRAM SERVICES | | MANA | C) GEMENT GENERAL | (D) FUNDRAISI | NG |
| SPEAKING/CONSULTING FEES OTHER INSURANCE | 57,700. 3,900. 2,864. | | 57,700. 3,767. 1,889. | | 0. 133. 975. | | 0 |
| MISC FUNDRAISING EXPENSES SIGNATURE GATHERING | 6,060. 1,797,386. | 1,7 | 0. 97,386. | | 0. 0. | 6,0 | 60. 0. |
| TOTAL TO FM 990, LN 43 | 1,867,910. | 1,8 | 60,742. | | 1,108. | 6,0 | 60. |

FORM 990

OTHER NOTES AND LOANS PAYABLE

STATEMENT

LENDER'S NAME

TERMS OF REPAYMENT

JOHN UHLMANN - AN

LUMP SUM

INDIVIDUAL

DATE OF MAT

MATURITY ORIGINAL DATE LOAN AMOUNT

INTEREST RATE

04/11/02 04/11/03

190,000.

.00%

SECURITY PROVIDED BY BORROWER

PURPOSE OF LOAN

NONE

BALLOT INITIATIVE FUNDING

RELATIONSHIP OF LENDER

NONE

DESCRIPTION OF CONSIDERATION

FMV OF

CONSIDERATION

BALANCE DUE

NONE

190,000.

190,000.

LENDER'S NAME

TERMS OF REPAYMENT

JOSEPH COORS - AN

INDIVIDUAL

LUMP SUM

DATE OF MATURITY

NOTE

DATE

ORIGINAL LOAN AMOUNT

INTEREST RATE

03/07/02 03/30/04

250,000.

.00%

SECURITY PROVIDED BY BORROWER

PURPOSE OF LOAN

NONE

BALLOT INITIATIVE FUNDING

RELATIONSHIP OF LENDER

NONE

FMV OF

DESCRIPTION OF CONSIDERATION

CONSIDERATION

BALANCE DUE

NONE

250,000.

250,000.

TOTAL INCLUDED ON FORM 990, PART IV, LINE 64, COLUMN B

440,000.

7

| 4 | | | | |
|----------------|--|-------------------|---------------------------------|--------------------|
| FORM 990 | PART V - OFFICER COMPENSATION FROM RELATED ORGANIZATIONS | | STATEMENT 5 | |
| OFFICER'S NAME | NAME OF RELATED ORGANIZATION | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT |
| WARD CONNERLY | AMERICAN CIVIL RIGHTS INSTITUTE (SEE STATEMENT 1) | 314,079. | 15,000. | 174354. |